



ARIZONA DEPARTMENT OF PUBLIC SAFETY
REQUEST FOR COPY OF REPORT
DEPARTMENT RECORDS SECTION 2102 W. ENCANTO BLVD.
MAIL DROP 1110 P. O. BOX 6638 PHOENIX, AZ 85005-6638



GENERAL INFORMATION

Please call the Department Records Section at (602) 223-2230 for report availability and number of pages each report contains. *(See pricing below.)*

PLEASE PROVIDE THE FOLLOWING INFORMATION.

(Print legibly to expedite processing your request.)

PROJECT NUMBER

- ☐ **REPORT ONLY** (\$9 Fee for first 9 pages, \$1 for each additional page)
☐ **PHOTO CONTACT SHEETS** (\$10 Each)
☐ **8 X 10 PHOTO** (\$4 Each) _____ no. of each ☐ **4 X 6 PHOTO** (\$4 Each) _____ no. of each

TODAY'S DATE: _____ REPORT NO. (if known) _____

DATE OF EVENT: _____ TIME OF EVENT: _____

HIGHWAY NAME: _____ MILEPOST NUMBER: _____

SUBJECT NAME: _____ DATE OF BIRTH: _____
(LAST) (FIRST) (M.I.)

INVESTIGATING OFFICER: _____

REQUESTER'S NAME: ☐ Mr. ☐ Mrs. ☐ Ms. _____

COMPANY NAME: _____

ADDRESS: _____

CITY: _____ STATE _____ ZIP _____

HOME PHONE: () _____ BUSINESS PHONE: () _____

SUMMARY OF ARS §28-667:

Arizona Revised Statute §28-667 prohibits examining or receiving copies of accident reports for commercial solicitation. "Commercial solicitation means a request for an accident report at a time when there is no relationship between the person or the principle of the person requesting the accident report and any party involved in the accident and there is not reason for the person to request the report other than for the purposes of soliciting a business or commercial relationship."

I certify that I have read the above summary of ARS §28-667, provided on this form, and agree that any information provided to me by the Department of Public Safety will be used solely within the parameters of ARS §28-667.

X

(SIGNATURE)

REQUEST COMPLETED / RELEASED		
PAYMENT RECEIVED <input type="checkbox"/> CASH <input type="checkbox"/> CHECK AMT. PAID \$ _____	<input type="checkbox"/> MAILED <input type="checkbox"/> PENDING <input type="checkbox"/> PLACED AT PICK-UP WINDOW X _____ (RECEIVED BY SIGNATURE)	DATE RELEASED I.D. NO.